



# **Georgia Office of Emergency Medical Services and Trauma**

## **EMS State License Application**

Office of EMS and Trauma  
Georgia Department of Public Health  
2600 Skyland Drive NE – Lower Level  
Brookhaven, GA 30319  
Phone: 404-679-0547

# APPLICATION INSTRUCTIONS

## REQUIRED DOCUMENTS TO ACCOMPANY WITH THIS APPLICATION

1. Copy (front and back) of current National Registration Card
2. Copy (front and back) of a current - signed CPR card any from the following: American Heart Association, American Red Cross, American College of Emergency Physicians, American Safety & Health Institute, Emergency Care & Safety Institute
3. For ATP Applicants: Copy of current credentials
4. For Paramedic Applicants: Copy of current ACLS credentials
5. Must complete a Fingerprint Background Check prior to submitting your application. (See Attachment A)
6. Copy of verifiable document that was shown to the Notary Public for U.S. Residency. (See Attachment B)
7. A non-refundable license fee of \$75.00 must accompany with the application. Payment must be in the form of Money Order, Business Check, or Cashier's Check only.

**MAKE CHECK PAYABLE TO "GEORGIA DEPARTMENT OF PUBLIC HEALTH"**

**PERSONAL CHECKS WILL NOT BE ACCEPTED**

8. Mail the completed application to:  
**Personnel Licensing  
Office of EMS & Trauma  
Georgia Department of Public Health  
2600 Skyland Drive NE - Lower Level  
Brookhaven, GA 30319**
9. Applications are normally processed within 5-7 business days.
10. Application status can be checked on our website after 5-10 business days at the following address  
[https://sendss.state.ga.us/sendss!/ems\\_lic\\_query](https://sendss.state.ga.us/sendss!/ems_lic_query)
11. Should you have any questions regarding the license requirements or completion of the application form, contact the Office of EMS and Trauma at 404-679-0547.

**ANY APPLICATIONS RECEIVED WITHOUT THE REQUIRED DOCUMENTS LISTED ABOVE 1-7 WILL DELAY THE LICENSING APPROVAL PROCESS.**



# GEORGIA OFFICE OF EMERGENCY MEDICAL SERVICES AND TRAUMA

## EMS STATE LICENSURE APPLICATION

Refer to the Application Instructions before completing the form. Type or block print only. **ALL FIELDS FROM SECTION 1-7 ARE REQUIRED.**

Select the type of service you are applying for (check one):

Initial EMT Certification Fee - \$75

EMT

PARAMEDIC

Reinstatement Certification Fee - \$75

ADVANCED EMT

### 1. Name

First Name \*

Middle Name \*

Last Name \*

Suffix (i.e., Jr., Sr., II, III, N/A) \*

### 2. Social Security Number

\*

-

\*

-

\*SSN is required to apply for an EMT license and will be kept confidential and used for Internal Identification purposes only.

### 3. Date of Birth

Month \*

Day \*

Year \*

### 4. Gender

\*

### 5. Race

\*

### 6. Personal Information

1st Line Address (P.O. BOX, Apartment, Suite, etc.) \*

2nd Line Address (Number and Street) \*

City \*

State \*

Zip Code \*

County \*

Phone Number \*

E-mail Address \*

### 7. Certification Requirements

#### MUST PROVIDE COPIES OF ALL REQUIRED DOCUMENTS LISTED BELOW

Copy of current National Registration Card

Copy of current CPR credentials

NREMT Registry #

*ATP Applicants:* Copy of current credentials.

Expiration Date

*Paramedic Applicants:* Copy of current ACLS credentials.

Fingerprint Background Check (See Attachment A)

Verification of US Residency (See Attachment B)

I CERTIFY THAT THE INFORMATION IN THIS APPLICATION IS TRUE, AND THAT I WILL NOTIFY THE OFFICE OF EMERGENCY MEDICAL SERVICES AND TRAUMA IN WRITING OF ANY CHANGE IN MY HOME OR MAILING ADDRESS, TELEPHONE NUMBER OR EMAIL ADDRESS. I UNDERSTAND THAT ANYONE WHO MAKES FALSE STATEMENTS TO THE DEPARTMENT MAY BE SUBJECT TO CRIMINAL PROSECUTION UNDER OFFICIAL CODE OF GEORGIA SECTION § 16-10-20; AND, THAT FALSE STATEMENTS MAY FURNISH GROUNDS FOR THE DENIAL OR REVOCATION OF A LICENSE.

SIGNATURE

DATE

#### FOR OEMS USE ONLY

☐ M/O Bank: \_\_\_\_\_

☐ C/C CH# \_\_\_\_\_

☐ B/C Amount Received: \_\_\_\_\_



Brenda Fitzgerald, MD, Commissioner | Nathan Deal, Governor

2 Peachtree Street NW, 15th Floor  
Atlanta, Georgia 30303-3142  
dph.ga.gov

*Division of Emergency Preparedness and Response ♦ J. Patrick O'Neal, MD, Director*  
*Office of Emergency Medical Services and Trauma ♦ Robert Keith Wages, Director*  
2600 Skyland Drive – Lower Level, Brookhaven Georgia 30319  
Phone: 404-679-0547 – Fax: 404-679-0526

## **Fingerprint Background Process for In-State Applicants**

- 1 Go to the COGENT / Georgia Applicant Processing Service (GAPS) website for registration at [www.ga.cogentid.com](http://www.ga.cogentid.com)



### Helpful Links

- > Find A Fingerprint Location
- > Modify Existing Registration
- > Cancel Existing Registration
- > Print Receipt
- > Refund Policy
- > How to Submit Ink Cards
- > Sales Inquiry

## **Welcome to the Georgia Applicant Processing Service for fingerprint background requests**

Electronic submission of fingerprint images will involve the use of a 3M Cogent Livescan machine. The Livescan captures fingerprint images and demographic data and submits this information to GBI. GBI conducts a search of its criminal history records using the fingerprint images. In some cases, these images are also forwarded to the FBI where a Federal Criminal History Record search is also conducted. Notifications of the search results are then forwarded from the GBI/FBI to 3M Cogent where these results are then electronically disseminated to the Georgia company or agency that requested the search to be completed.

**Applicant Registration**

GAPS Agency Login

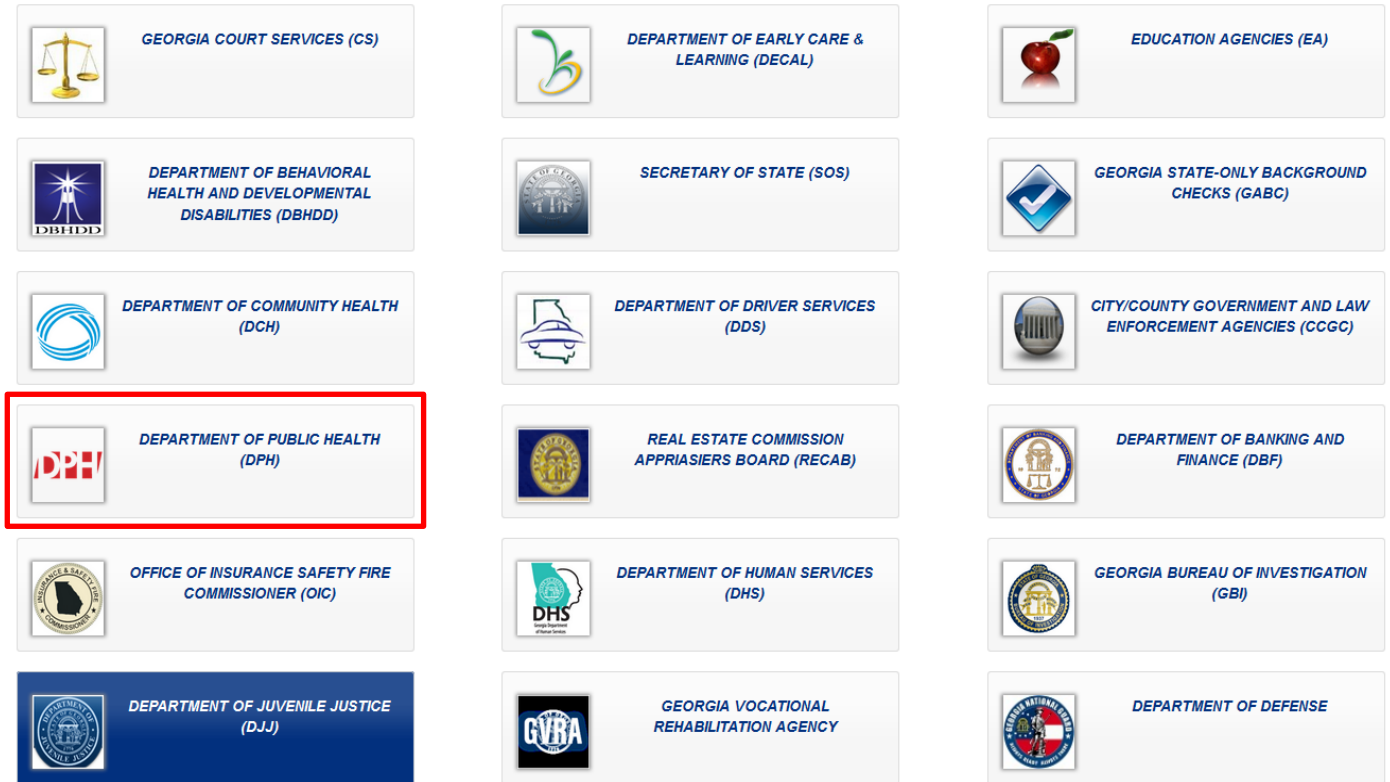
Become a Requesting Agency

- 2 On the GAPS Welcome Page, select **Applicant Registration** as indicated on the screenshot above inside the red box.



*We Protect Lives.*

➤ To register for a background check, please select one of the options below:



3 On the Georgia Agency Page, select DPH as shown at right and as indicated on the screenshot above inside the red box.



4 On the DPH Page, select **Emergency Medical Services** as indicated on the screenshot below inside the red box.



The Georgia Department of Public Health (DPH) is the lead agency in preventing disease, injury and disability; promoting health and well-being; and preparing for and responding to disasters from a health perspective. In 2011, the General Assembly restored DPH to its own state agency after more than 30 years of consolidation with other departments. At the state level, DPH functions through numerous divisions, sections, programs and offices.

Locally, DPH funds and collaborates with Georgia's 159 county health departments and 18 public health districts. Through the changes, the mission has remained constant; to protect the lives of all Georgians. Today, DPH's main functions include: Health Promotion and Disease Prevention, Maternal and Child Health, Infectious Disease and Immunization, Environmental Health, Epidemiology, Emergency Preparedness and Response, Emergency Medical Services, Pharmacy, Nursing, Volunteer Health Care, the Office of Health Equity, Vital Records, and the State Public Health Laboratory.

**Website:**  
[DPH Homepage](#)

**Contact:**  
[Email EMS](#)  
(404) 679-0547

*We Protect Lives.*

## Non-Criminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a state and/or national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

You must be provided written notification that your fingerprints will be used to check the criminal history records of the Georgia Crime Information Center (GCIC) and the FBI when a federal record check is so authorized.

If you have a criminal history record, the agency making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.

The agency must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.

If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the agency denies you the job, license, or other benefit based on information in the criminal history record.

You have the right to expect the agency receiving the results of the criminal history record check will use it only for authorized purposes and will not

☒ I have read and accepted these terms.

[Print](#) | [Download](#)

Cancel

Continue

On the Non-Criminal Justice Applicant's Privacy Rights Page, you read the terms and check the box verifying that you accept the terms. Once you have accepted the terms, you click **Continue**.

Enter all required information on the **Applicant Registration Page**.

**Out-of-State Applicants** – Applicants that are submitting fingerprint cards need to check the box under the **Fingerprint Card User** option as shown below in the red and follow instructions below for Out-of-State Applicants.

**Please be advised there is an additional charge of \$8.00 for ink card submissions.**

**Applicant Registration**  
**Step 1 - Please Enter Your Information**

Transaction Information	
Reviewing Agency ID: GA922993Z	Reason: SELECT
Requesting Agency ID: (If different from Reviewing Agency ID)	Position Applied for:
Payment: Credit Card <small>No unemployment cards, child support cards or gift cards are accepted.</small>	Fingerprint Card User: <input checked="" type="checkbox"/> By Checking this box, you are agreeing to submit ink cards to 3M Cogent. See <a href="#">here</a> for details.

Personal Information	
Last Name:	First Name:
Middle Name:	Suffix: SELECT
Social Security #: No dashes	Re-enter SSN: No dashes
Date of Birth: MMDDYYYY	Weight:
Sex: SELECT	Race: SELECT
Eye Color: SELECT	Hair Color: SELECT
Height: SELECT	Place of Birth: SELECT
Country of Citizenship: SELECT	State Driver's License: SELECT
Driver's License #: Don't include 'GA'	

Address Information	
Address:	Address 2:
City:	APT:
State: SELECT	Zip:
Phone #:	Email:

**Note:** \* Fields in yellow are required.  
Please note that fingerprinting hours may be different than open store hours. Be sure to confirm that the location is fingerprinting before heading down.

**We Protect Lives.**

## **REGISTRATION IDENTIFICATION NUMBER**

**8** ***In-State Applicants Only:*** Once the registration process has been completed, a Registration Identification Number will be issued. Print the receipt confirmation. You will need to take the receipt with you to present when you get your fingerprints scanned.

***Out-of-State Applicants Only:*** Print the receipt confirmation of your completed registration process and submit a copy with your fingerprint ink card. Per COGENT, please write the Registration Identification Number on the back of the ink card. **See instructions below on Step 9.**

**\*\*\*NOTE – The COGENT / GAPS Registration Identification Number is only valid for 90 days and will be cancelled by COGENT if it has not been used within that timeframe. At that time, re-registration will be required. Additional fees will apply.**

## **Hardcopy Fingerprint Card Submission Instructions**

### **FINGERPRINT CARD – Out-of-State Applicants Only**

**9** Take your OEMS fingerprint ink card to a law enforcement agency to be completed. Be advised that law enforcement agencies may have fees and additional requirements associated with fingerprinting individuals.

**Payment** – Payment may be made online or a money order can be sent with your fingerprint card:

*Option 1: Online Payment* – Applicants may pay online at the time of registration using a credit/debit card, or the transaction may be billed to your employer using “agency pay”.

*Option 2: Send payment with Fingerprint Card* – Money order only. Cash and personal checks are not accepted.

**Registration ID** – All applicants will receive a Registration ID. Write this number on the back of your fingerprint cards.

**Submission** – Mail the cards (and if applicable, payment) to:

**3M COGENT, Georgia CardScan  
639 N Rosemead Blvd  
Pasadena, CA 91107**

**Results** – Background check results will be sent directly to your employer. 3M Cogent does not have access to background check results or make employment determinations. Please check with your employer regarding questions about your background check results.

***We Protect Lives.***



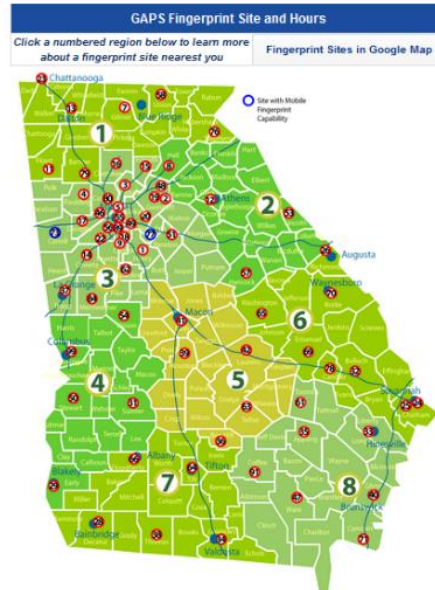
# 10

## SCANNING YOUR FINGERPRINT – In-State Applicants Only

Once you have completed your registration, you will need to choose a location to have your fingerprints scanned. On the GAPS Welcome Page, select **FIND A Fingerprint Location** under the Helpful Links Menu as indicated on the screenshot below inside the red box.

### Helpful Links

- > Find A Fingerprint Location
- > Modify Existing Registration
- > Cancel Existing Registration
- > Print Receipt
- > Refund Policy
- > How to Submit Ink Cards
- > Sales Inquiry



On the GAPS Fingerprint Site and Hours Page, select one of the 8 numbered regions (circled in yellow) for information about a fingerprint site nearest you. Take your receipt with your Registration ID Number.

Once you have your prints scanned, you will be given a Transaction Control Number (TCN) that you can submit to OEMS with your application.

# 11

## FINGERPRINT BACKGROUND HISTORY RESULTS

***In-State Applicants Only:*** Once your fingerprint has been processed, OEMS will receive the results directly from 3M COGENT within 2 business days.

***Out-of-State Applicants Only:*** Once your fingerprint has been processed, OEMS will receive the results directly from 3M COGENT within 5 business days.

**\*\*\*NOTE – The Fingerprint Background History results will only be valid to OEMS for 30 days.**  
***Applicants whose applications are not received by OEMS within the 30-day timeframe will be required to re-register and complete the COGENT / GAPS process again. All applicable fees will apply.***



## NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant that is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history record check for a non-criminal justice purpose (such as an application for a job or license, immigration or naturalization, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- If your fingerprints/biometrics are used to conduct a FBI national criminal history check, you are provided a copy of the Privacy Act Statement that would normally appear on the FBI fingerprint card.
- If you have a criminal history record, the agency making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The agency must advise you of the procedures for changing, correcting, or updating your criminal history record as set forth in Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a Georgia or FBI criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the agency denies you the job, license or other benefit based on information in the criminal history record.
- In the event an adverse employment or licensing decision is made, you must be informed of all information pertinent to that decision to include the contents of the record and the effect the record had upon the decision. Failure to provide all such information to the person subject to the adverse decision shall be a misdemeanor [O.C.G.A. § 35-3-34(b) and §35-3-35(b)].

You have the right to expect the agency receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of state and/or federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

If the employment/licensing agency policy permits, the agency may provide you with a copy of your Georgia or FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, information regarding how to obtain a copy of your Georgia, FBI or other state criminal history may be obtained at the [GBI website](http://gbi.georgia.gov/obtaining-criminal-history-record-information) (<http://gbi.georgia.gov/obtaining-criminal-history-record-information>).

If you decide to challenge the accuracy or completeness of your Georgia or FBI criminal history record, you should send your challenge to the agency that contributed the questioned information. Alternatively, you may send your challenge directly to GCIC provided the disputed arrest occurred in Georgia. Instructions to dispute the accuracy of your criminal history can be obtained at the [GBI website](http://gbi.georgia.gov/obtaining-criminal-history-record-information) (<http://gbi.georgia.gov/obtaining-criminal-history-record-information>).

## PRIVACY ACT STATEMENT

**Authority:** The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

**Principal Purpose:** Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

**Routine Uses:** During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

## 28 CFR 16.30 through 16.34

### **§ 16.30 Purpose and Scope**

This subpart contains the regulations of the Federal Bureau of Investigation (FBI) concerning procedures to be followed when the subject of an identification record requests production of that record to review it or to obtain a change, correction, or updating of that record.

### **§ 16.31 — Definition of identification record**

An FBI identification record, often referred to as a “rap sheet,” is a listing of certain information taken from fingerprint submissions retained by the FBI in connection with arrests and, in some instances, includes information taken from fingerprints submitted in connection with federal employment, naturalization, or military service. The identification record includes the name of the agency or institution that submitted the fingerprints to the FBI. If the fingerprints concern a criminal offense, the identification record includes the date of arrest or the date the individual was received by the agency submitting the fingerprints, the arrest charge, and the disposition of the arrest if known to the FBI. All arrest data included in an identification record are obtained from fingerprint submissions, disposition reports, and other reports submitted by agencies having criminal justice responsibilities. Therefore, the FBI Criminal Justice Information Services Division is not the source of the arrest data reflected on an identification record.

### **§ 16.32 — Procedure to obtain an identification record**

The subject of an identification record may obtain a copy thereof by submitting a written request via the U.S. mails directly to the FBI, Criminal Justice Information Services (CJIS) Division, ATTN: SCU, Mod. D-2, 1000 Custer Hollow Road, Clarksburg, WV 26306. Such request must be accompanied by satisfactory proof of identity, which shall consist of name, date and place of birth and a set of rolled-inked fingerprint impressions placed upon fingerprint cards or forms commonly utilized for applicant or law enforcement purposes by law enforcement agencies.

### **§ 16.33 — Fee for production of identification record**

Each written request for production of an identification record must be accompanied by a fee of \$18 in the form of a certified check or money order, payable to the Treasury of the United States. This fee is established pursuant to the provisions of [31 U.S.C. 9701](#) and is based upon the clerical time beyond the first quarter hour to be spent in searching for, identifying, and reproducing each identification record requested as specified in § [16.10](#). Any request for waiver of the fee shall accompany the original request for the identification record and shall include a claim and proof of indigency. Subject to applicable laws, regulations, and directions of the Attorney General of the United States, the Director of the FBI may from time to time determine and establish a revised fee amount to be assessed under this authority. Notice relating to revised fee amounts shall be published in the *Federal Register*.

### **§ 16.34 — Procedure to obtain change, correction or updating of identification records**

If, after reviewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wishes changes, corrections or updating of the alleged deficiency, he/she should make application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Services (CJIS) Division, ATTN: SCU, Mod. D-2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that agency to verify or correct the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency.

## GEORGIA OFFICE OF EMERGENCY MEDICAL SERVICES AND TRAUMA

### Verification of Lawful U.S. Residency for License Application

#### O.C.G.A. Section § 50-36-1(e)(2)

As part of my application for licensure from the Georgia Department of Public Health, I hereby swear, under oath, that I am:

*[Check one of the following]*

- (1) A citizen of the United States;
- (2) A legal permanent resident of the United States;
- (3) A qualified alien or non-immigrant under the Federal Immigration and Nationality Act. The alien number assigned to me by the United State Department of Homeland Security or other federal immigration agency is Alien Number

I also swear that I am eighteen years of age or older, and that I have provided at least one secure and verifiable identity document with this affidavit, as required by O.C.G.A. Section § 50-36-1(e)(1). The secure and verifiable document is my

**The original “secure and verifiable document” was shown to the notary public, and a true copy of the document is attached to my application with this affidavit.**

In making these representations, I understand that any person who knowingly and willfully makes a false statement in an affidavit on any matter within the jurisdiction of state government shall be guilty of a violation of O.C.G.A. Section § 16-10-20 and face criminal penalties authorized by the statute.

Signature of Applicant

Subscribed and sworn before me this  
day of , .

Printed Name of Applicant

Notary Public  
My Commission Expires

## **Secure and Verifiable Documents Under O.C.G.A. § 50-36-2**

Issued July 10, 2013 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”), as amended by Senate Bill 160, signed into law as Act No. 27, (2013), provides that “[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(g). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

- An unexpired United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired driver’s license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at:  
<http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

- An unexpired Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired passport issued by a foreign government, provided that such passport is accompanied by a United States Department of Homeland Security (“DHS”) Form I-94, DHS Form I-94A, DHS Form I-94W, or other federal form specifying an individual’s lawful immigration status or other proof of lawful presence under federal immigration law<sup>1</sup> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- An unexpired NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- An unexpired Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- An unexpired driver’s license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- Certification of Report of Birth issued by the United States Department of State (Form DS-1350) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- Certification of Birth Abroad issued by the United States Department of State (Form FS-545) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

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<sup>1</sup> Senate Bill 160 (Act No. 27), effective July 1, 2013, limited the use of passports issued by foreign nations to satisfy the requirements for submission of secure and verifiable documents to only those passports submitted in conjunction with a United States Department of Homeland Security (“DHS”) Form I-94, DHS Form I-94A, DHS Form I-94W, or other federal form specifying an individual’s lawful immigration status or other proof of lawful presence under federal immigration law.

- Consular Report of Birth Abroad issued by the United States Department of State (Form FS-240) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- An original or certified copy of a birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]